

Grayslake Youth Baseball Association

Grayslake Youth Baseball David G Peregrin Scholarship

Deadline: April 5th, 2019

A \$2,500.00 scholarship will be awarded to a Grayslake Community High School District 127 *senior(s) (Class 2019) who plans to further their education at an institution of higher learning immediately following graduation. This award is limited to senior varsity softball and baseball players.

Applicants must submit the following

- Completed cover sheet with Counselor's signature.
- Typed personal statement on where you see yourself and your aspirations.
- Proof of acceptance (or proof of application if acceptance has not yet been received) to college or university of choice.
- List of school and community activities, including leadership positions <u>outside of baseball</u>. Be specific on involvement and personal achievements that could be formative in your future dreams.
- Official **sealed** academic transcript (based on 7 semesters)
- Completed <u>Scholarship Recipient Certification</u>.
- Proof of lettering in varsity softball or baseball from Athletic Director.
- Candidates must make themselves available for a 20-minute interview with Scholarship Committee.

Selection will be based on individuals who have demonstrated exemplary leadership and life skills, through civic and community activities, academic success, and the fulfillment of the "TEAM" commitment.

^{*}The Scholarship Foundation Committee reserves the exclusive right in determining the individual / individuals recognized for this award. In the event the committee recognizes that more than one candidate is deserved of this award, the monetary amount can be adjusted accordingly.



The Grayslake Youth Baseball Association David G Peregrin Scholarship Cover Sheet

Name:					<u> </u>
Address: Cell Phone:					1
Cen I none.				_	
Colleges/Uni	versities to whic	ch you have b	een accepted	:	
Possible Maj	or of Interest (if	f decided):			
				_	
Athletic Spor	rts and year play	yed while in I	High School:		
List school a	nd community a	ectivities inclu	ıding any lea	dership positio	ons:
Student Sign	ature/Date:				
Counselor Si	gnature/Date:				

We strongly recommend attaching additional pages of background information to this document. Upon completion, <u>return all material to the College Career Center</u> by <u>April 5th, 2019.</u>

Please return all documents with attachments.



Scholarship Recipient Certification

Ι,	do hereby certify to the
Grayslake Youth Baseball Association, an	nd agree to the following:
I am a graduate of Grayslake Community	High School District 127.
I have been accepted to University) and will attend this college /u	(college or niversity in the Fall of 2019.
I agree that the scholarship amount of \$2, supplement tuition, room/board and class	500.00 or any awarded amount will be used to books.
I agree that the check issued for the schol to the recipient and recipient's college or u	· · · · · · · · · · · · · · · · · · ·
I agree to supply to the GYBA (Grayslake within six (6) months of the scholarship fucertifying that the scholarship funds were above.	ands, receipts or other documentation
If I fail to provide the above receipts or or agree to refund to the Grayslake Youth Ba amount I have received as the recipient of Scholarship Award.	aseball Association (GYBA) the
The GYBA may publicize, in print or oth recipient of the GYBA David G Peregrin	
The award will be announced at the respe	ective schools Honors Night.
	S Signature
	((Please Print Name)
	Date